East Prince Health

ANNUAL REPORT

2001-2002

Contributing to a brighter and healthier future for families, individuals and communities.

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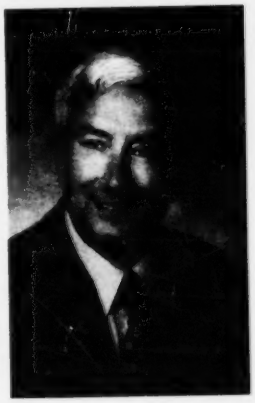
MESSAGE FROM THE BOARD CHAIR



Dr. Allen MacLean

I am pleased to present you with the 2001 - 2002 Annual Report. Being the new Chair of the East Prince Health Board has been an interesting learning experience and has given me an appreciation of the level of commitment and skill practiced by our previous Chair, Katherine Kelly.

One of the most significant items over this past year was the announcement by the Honorable Jamie Ballem, Minister of Health and Social Services, on the restructuring of the PEI health system. The newly formed Provincial Health Services Authority will have administrative authority over Prince County Hospital, Queen Elizabeth Hospital, Hillsborough Hospital and the Mount Herbert Addictions Center. This is a major change to the structure of East Prince Health but can be viewed as an opportunity for this community to focus on the less acute services of healthcare.

For East Prince Health and other health regions, the transition means our responsibility will be primarily to assist our residents to be as healthy as possible thus diminishing their dependence on acute care services. This change will allow us to focus more than ever upon wellness in our community and to build bridges or partnerships with those groups and organizations who share that vision. In this annual report, you will see that East Prince Health is comprised of a variety of health and social services. It is a very special organization that includes skilled and dedicated people providing home and manor care, income support, child, youth and family services, addiction services, public health nursing, community wellness education, long term care, housing, acute care and mental health services. Prevention and identification of those at high risk and earlier intervention will increasingly be our focus.

As time passes, East Prince Health hopes to assist our citizens to gain a greater understanding of what they can do to reduce risk of disease and accident. It is in everyone's interest that we embrace and act on every opportunity to enhance the determinants of health and more effectively deal with efforts such as chronic disease management.

I wish to acknowledge the important milestones reached over the past year in the planning and construction of the new Prince County Hospital. Our community is excited to see the payoff of many hours of excellent work by the Facility Planning Committee and Chief Planning Officer Kay Lewis, successful fundraising by the Prince County Hospital Foundation and the professional and timely construction work of East Prince Partnerships Limited.

The East Prince Health Board members are listed on the page 5. These people representing the various zones of East Prince have the health of this community at heart. I would like to take this opportunity to thank them for their contribution and support over the past year. We always appreciate your comments on how we can improve our connection to you or better assist you or your family.

Respectfully submitted,
Dr. Allen MacLean, Board Chair

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MESSAGE FROM THE C.E.O.

David Riley

I wish to first remark on the ongoing dedication of our many staff, physicians, volunteers, and the general community who contribute so broadly to the success of East Prince Health. It is the people who truly create the high level of quality health care offered in this Region.

As our focus is now changing from acute care to one of primary care, at East Prince Health we find ourselves increasingly faced with the challenge of forming further partnerships with the community we serve. Over the past year we have been working to plan for a successful and sustainable East Prince Health of the future. We realize that, by many accounts, we must work differently in order to achieve a greater impact on the health of our community.

We also realize that as we look to the future, we must examine the past and build on its many successes. This is a pivotal time for the evolvement of healthcare in this Region. To ensure sustainability of health services we must focus on our ability to share mutual goals with our fellow community residents. We must collectively work to provide creative and effective solutions to the many challenges we face in the area of health and wellness.

Certainly with a new hospital on the horizon, this community will see vast improvements in healthcare technology and hospital services, but it is how those services are integrated into the community and with other complementary services that we see the potential of our health system. Rather than look at what health and social services can do for us, we must all consider the role we play in contributing to a healthy community.

I also wish to acknowledge the vast investment of time staff and physicians contributed to our recent and successful accreditation process. For a second term, our Region has proven that our work practices pass the measure of excellence set by the national standards through the Canadian Council on Health Services Accreditation.

As you review this annual report, consider the impact the community is making on the success of our services. I am extremely proud that we are able to accomplish so much in these challenging times.

I thank you for taking the time to read this report and welcome your comments, input and involvement in our regional activities.

Respectfully submitted,

David B. Riley
Chief Executive Officer

EAST PRINCE HEALTH BOARD & MISSION

BOARD MEMBERS

Dr. Allen MacLean, Chair
Barry Murray, Vice Chair, Kensington
Carol Peters, Summerside
Gertrude Trainor, Shamrock
Henri Gallant, Evangeline
Stuart Affleck, Bedeque
Blanche Maynard, Tyne Valley
Doreen Gunn, Summerside
Elmer Williams, Summerside

MISSION

East Prince Health will support and encourage individuals, families, and communities to attain and maintain their best possible health.

In order to accomplish this mission, East Prince Health has three distinct areas of responsibility:

Quality health and social services

Appropriate to their need, people will receive health and social services that make a difference to their quality of life:

- people will have access to an integrated system of quality health and social services;
- people will be treated with dignity and respect while receiving services;
- people will know about available services and how to access them.

Education and information

People will understand:

- the broad definition of health;
- the broad determinants which affect health;
- how to take responsibility for their own health;
- how to use the health system appropriately.

Partnering for health

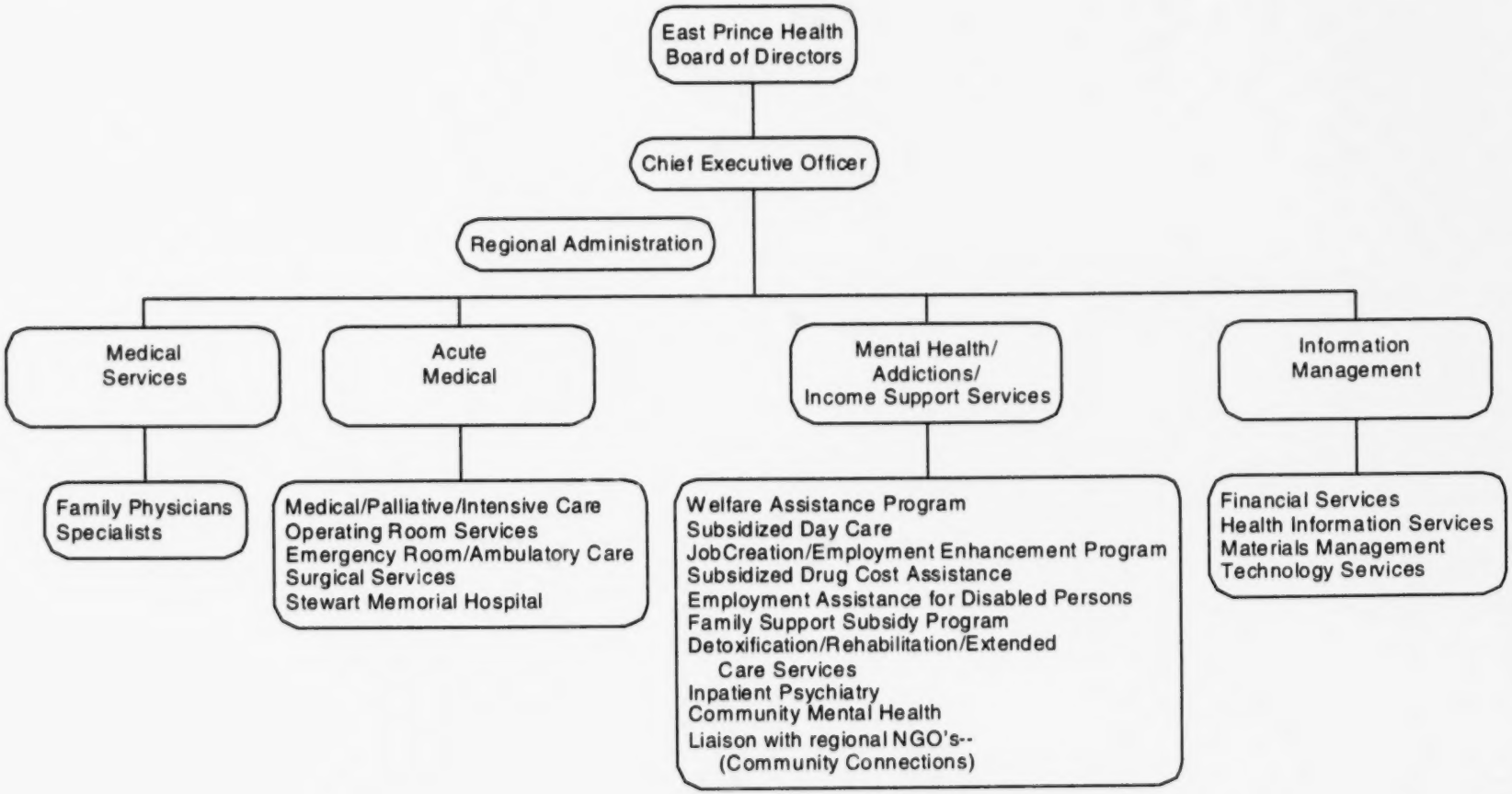
Partnerships in Service:

- People will have access to an integrated system of quality health and social services as a result of East Prince Health partnering with other health and social services providers.

Partnerships for a Healthier Community

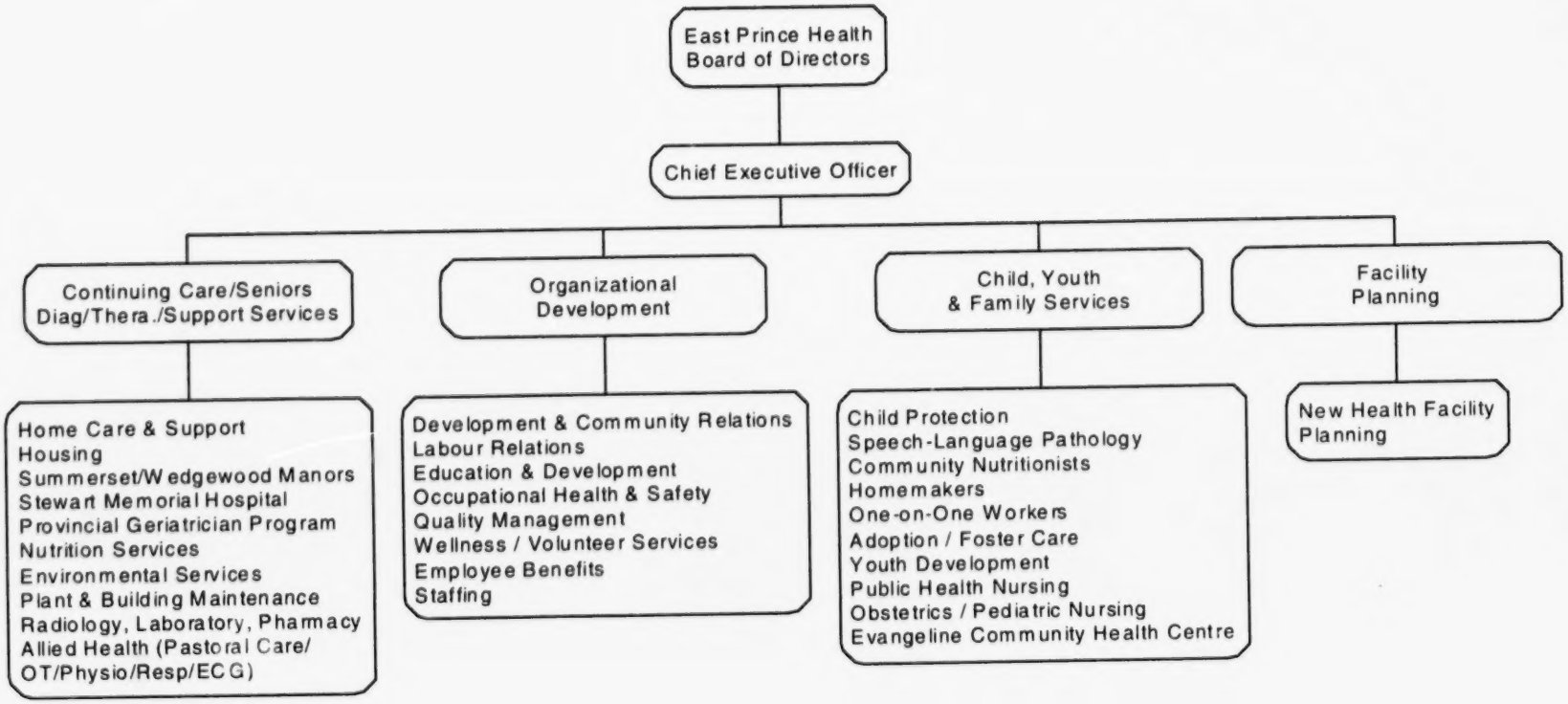
- Individuals, families, and communities will be as healthy as possible as a result of East Prince Health partnering with others to positively affect the determinants of health.

ORGANIZATIONAL STRUCTURE



Part A

ORGANIZATIONAL STRUCTURE



ORGANIZATIONAL DEVELOPMENT

Organizational Development

Budget: $833,200

Permanent Staff: 11

Volunteers: 500+

Purpose

Organizational Development exists in order to strengthen East Prince Health as a caring and quality client-focused learning organization by partnering with individuals, teams and communities to:

- recruit and retain appropriate human resources;
- promote and support a healthy environment; and
- influence and contribute to the strategic direction of East Prince Health.

Services

- Education
- Occupational Health & Safety
- Wellness
- Labour Relations
- Quality Management, including: Risk Management, Utilization Management, Results Measurement
- HR Staffing & Administration
- Benefits
- Communications
- Policy and Planning
- Volunteers

REWARDS AND RECOGNITION

This past year, East Prince Health established the Charles Linkletter Brighter Futures Award, a prestigious new Regional award to honour individuals or groups in the community who have demonstrated special achievement in healthcare and wellness promotion.

Local artist, Joan Savage, was commissioned to create a chalk pastel of Taylor's Pond, North Granville, where Mr. Linkletter often enjoyed many hours of rest and relaxation. Recipients of the award are presented with a signed limited edition print at the annual meeting held in November. The original art work hangs in the front lobby of the Administrative Services Building.

Mrs. Linkletter and Board Chair, Katherine Kelley, presented the 2001 award to Notre Dame Place. Notre Dame Place was honoured for its long standing contribution to mental health services in the community.

Numerous other recognition activities happened throughout the year to recognize the dedication and service excellence provided by staff, physicians, and volunteers in the Region.

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ORGANIZATIONAL DEVELOPMENT

VOLUNTEER SERVICES PROGRAM

East Prince Health celebrates the International Year of Volunteers. The Value of One. The Power of Many.

More than 500 people provide volunteer services to East Prince Health. In recognition of these individuals, the East Prince Health Volunteer Services Program organized a variety of events to celebrate International Year of the Volunteers in 2001. The highlight was the December 5, International Volunteer Day event featuring special guests, Minister Jamie Ballem, CEO Dave Riley, and guest speaker, Rev. Carolyn MacLeod.

Volunteer Services continues to work closely with staff to develop new volunteer roles. Some examples include the following:

- *Bereavement Phone Call Service:* In June 2001 a Bereavement Phone Call Service was initiated for Home Care and Palliative Care Programs. Volunteers make follow-up phone calls to bereaved families who have been identified by staff.

- *Mammography/Radiology:* In Sept. 2001, a new volunteer role began for Mammography /Radiology Department at PCH. Volunteers are now positioned to meet people as they arrive for testing.

- *Cardiac Outreach Support:* Cardiac Outreach volunteers for the ICU Department at PCH were recruited to offer support to cardiac patients who are awaiting further investigation or treatment.

- *Special Projects:* Throughout the year special projects included Katimavik youth volunteers from across Canada who worked at PCH , Home Care and Wedgewood Manor.

- *"Thinking of You:"* This program was initiated by partnering with local community groups who donated items for personal care packages for hospital patients in need.

Volunteers are involved in many aspects of care for patients, residents and clients of East Prince Health and there are now thirty-five different roles. Whether assisting a child with speech therapy, or a friendly visit with a senior in Long Term Care, volunteers are a very important part of our services and are very much appreciated.

ORGANIZATIONAL DEVELOPMENT

CREATING HEALTHIER WORK ENVIRONMENTS

Workplace health and wellness is now an ongoing priority throughout the East Prince Health region. It is recognized that a clear link exists between the organizations ability to achieve its objectives and workplace wellness.

In October 2001, a comprehensive workplace wellness strategy was rolled out and positioned as an essential and integral component of the organization. This was developed in response to the Health Canada Workplace Health survey that was distributed to all 1100 staff and physicians in order to determine their priorities in the area of personal and workplace health. The five key priority areas identified and included in the strategy are: Healthy Eating, Physical Activity, Stress Management, Safe Workplaces and Ongoing Health Promotion.

East Prince Health was the first health organization in the Maritimes to adopt the Health Canada model for workplace health. It has been used in many other areas of the country over the past ten years and has recently been used in other health regions of the Province as well.

The workplace is an ideal setting for promoting wellness since employees spend many hours at their paid work. In addition to already established wellness initiatives in the region, new activities are constantly evolving in response to changing needs. Some of these include:

- Physical activity challenges
- Aerobics classes
- Pedometer research project with UPEI
- Wellness Bulletin Boards with monthly health themes
- Healthy supper recipes project
- Success over Stress initiatives
- Lunch Time Wellness Series
- Wellness Days
- Worksite Health Screenings

East Prince Health remains committed to an increased emphasis on wellness and health promotion both in the workplace and in the broader community, recognizing the positive impact on the health system by helping people help themselves stay healthy.

ORGANIZATIONAL DEVELOPMENT

CONTINUOUS LEARNING — HELPING EAST PRINCE HEALTH STAY COMPETITIVE

Education and development for staff, physicians and volunteers is a high priority at East Prince Health. Even in these times of tighter budgets and higher costs for training, East Prince Health Directors and Managers have been very strategic in their quest to align employee training with departmental and organizational training requirements so as to gain the best benefits from the spending of their training and education dollars.

The East Prince Health Education Calendar, Provincial Government "Learning Centre" programs, university and/or college courses, workshops, distance education programs, self-directed learning programs and subscriptions to the latest technical/professional journals were some of the ways East Prince Health promoted and provided for continuous learning and development.

The East Prince Health Education Calendar for 2001-2002 was aligned with the strategic direction for the Region providing "just-in-time" learning opportunities to assist staff in day-to-day challenges whether at work or at home. With more emphasis being placed on wellness this year, some of the education programs were specific to this area.

Heavy workloads and replacement issues challenged staff as they considered education and development opportunities. This prompted creative teamwork and cooperative spirit for all teams to resolve. Despite these difficulties, EPH provided 260 hours of education for employees, physicians and volunteers through the education calendar. There were a total of twenty-five different educational topics from which to choose. As well, departments and services provided additional education opportunities through workshops and conferences on topics specific to their service delivery.

Evaluation of the education programs continued to be very positive as rated and critiqued by those in attendance.

CONTINUING CARE & SENIOR SERVICES

Senior Services

Budget: $6,185,000

Permanent Staff: 156

Long-term Beds: 181

Senior Housing Units: 296

Monthly Average Home Care Caseload: 410

Purpose

Continuing Care and Seniors of East Prince Health provides clinical, residential and support services to seniors aged 60 years and older, and individuals under 60 years who have special functional and or community needs, who reside in East Prince, so that they can attain and maintain optimal health.

Services

- Home Care
- Housing
- Provincial Geriatrician Program
- Stewart Memorial Hospital
- Summerset Manor
- Wedgewood Manor
- Palliative Care

Over the past year, there were ongoing nursing recruitment challenges. Because of the current nursing shortage, convalescent bed closures at Stewart Memorial Hospital have taken place from time to time throughout the year.

At the two Senior Manors and at Stewart Memorial Hospital, one of the key achievements has been the installation of ceiling lifts. The ceiling lift installations were seen as a priority as part of the health region's commitment to high quality resident and patient care as well as a benefit to the well-being of staff. The lifts are used to transfer residents safely and securely thus greatly enhancing care and comfort.

There is also less risk involved for health care workers with this type of transfer due to the stationary nature of the lift. A track is securely mounted to each resident's room ceiling. The lift is able to move along this track and can raise and lower residents with the touch of a button on a handset.

Evidence compiled over the last ten years has shown that ceiling lifts can dramatically change the lives of workers in long term care environments. Statistics show that facilities using ceiling lifts reduce staff back injuries by 75 percent.

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CONTINUING CARE & SENIOR SERVICES

SENIOR CITIZENS HOUSING PROGRAM

This program provides 298 units for seniors across East Prince region. Tenants are selected on the basis of need which is determined by a rating system. When assessing need, consideration is given to a person's income, assets, health, present accommodations, age, and length of time the application has been on file. This program is funded jointly by the federal and provincial governments. The East Prince region received 53 new applications for senior housing in 2001/2002 and 49 applicants were placed throughout the year. East Prince Health also provides support to the local Family Housing Board for low income housing in the region.

PROVINCIAL GERIATRICIAN PROGRAM

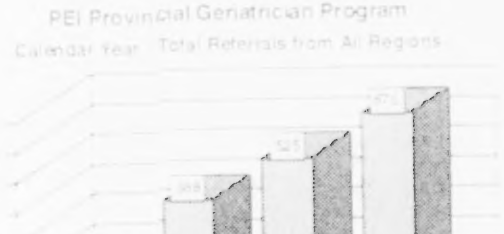
The Provincial Geriatrician Program continues to provide consultative assessment and educational services to the senior population and their care givers. The program has seen a continued increase in referrals from family physicians across PEI. The average age of clients seen is 80 plus years. The program focuses on assessment of the frail and elderly who have problems in areas such as memory, physical frailty, depression, mobility, handling finances, medications, etc. Assessments are provided in the home, office, community and institutional settings. The program depends on the geriatrician working collaboratively with nurses, physicians, other health disciplines and family members to pursue positive outcomes for the client.

Geriatrician program referrals received:

Queens	**265**
East Prince	**220**
East Kings	**49**
Southern Kings	**45**
West Prince	**91**
Total	**670**

(an increase of 145 referrals from 2000)

In the past year, the program provided educational sessions for health care providers, family members, students and community groups covering a variety of topics related to the aging process. A fourth-year UPEI Nursing student and two Dalhousie Medical Students were placed with the program throughout the year. The program contributed to the ongoing planning for Restorative Care programming on PEI, in Prince County Hospital and Prince Edward Home.



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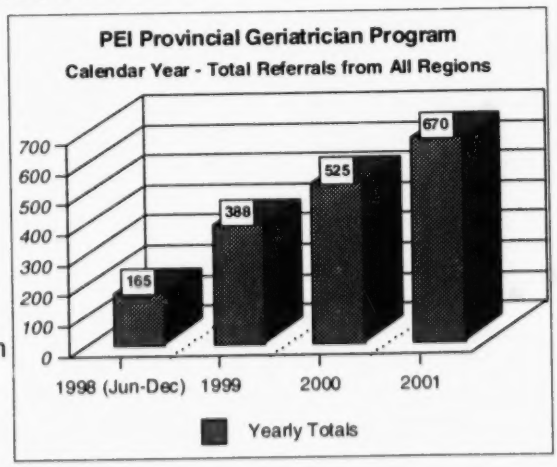


CONTINUING CARE & SENIOR SERVICES

PALLIATIVE CARE PROGRAM

The concept of a palliative care unit emerged early in the planning stages of the new Prince County Hospital. At the same time, the East Prince Health Region began participation as a demonstration site in the Rural Palliative Home Care Project. The Region developed its palliative care service delivery model based on the principle of integration. Care settings share common standards, a common vision and work together as a program rather than individual organizations.

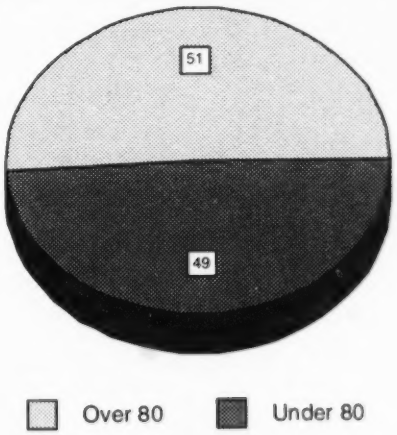
In April of 2000 the East Prince Health Palliative Care Program registered its first patient. To date, over one hundred and thirty patients and families from various care settings throughout East Prince Health (such as hospital, home and long term care) have benefited from the program.

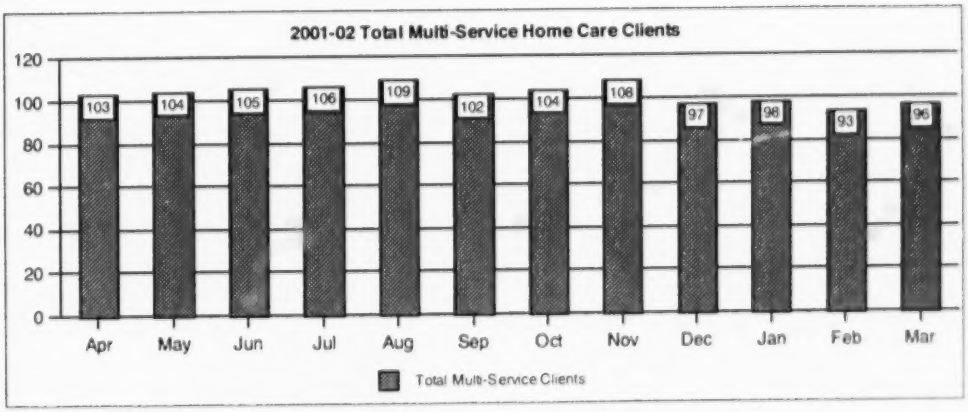
HOME CARE SERVICES

Aside from regular duties in Homecare, over the past year staff have been involved in the planning of the Integrated Service Management System being implemented across the province.
The Home Care caseload continues to be approximately 400 clients at one time.

Also, there has been a substantial increase in the complexities of the Adult Protection cases that are being reported and require investigation follow-up and ongoing monitoring.

Percentage of Home Care caseload over 80 years of age





CHILD, YOUTH & FAMILY SERVICES

Purpose

In partnership with others, provide clinical, protective and support services which address addictions, mental health and child protection issues for individuals and families in East Prince, so that communities are inclusive, healthy and safe.

Services

- Child and Family Services
- Public Health Nursing
- Evangeline Community Health Centre
- Obstetrics / Pediatrics

Budget: $5,479,400

Permanent Staff: 63

Regional Child Protection Statistics for 2001 - 2002

70 children in care (total for year)

646 intake referrals (of these 104 domestic violence, 102 neglect)

20 regular foster homes;
7 kinship homes

Family Focus
87 referrals (of these 23 parent/child conflict)

Nutrition Referrals

Prenatal referrals: 85

Child feeding issues: 11

Special diet assessments: 6

Other: 4

CHILD & FAMILY SERVICES

Child Protection: The Child Protection Act Implementation Project began in January 2002 with the establishment of the Act implementation team composed of regional representatives. The work of the team has focused on program policies and standards, forms for all sections affected in the new Act, caseload review, training curriculum and transition issues.

Speech-Language Pathology: There were 100 referrals received in this area, an increase from 93 received in 2000-2001. Caseloads include preschool/school age children and adults with approximately two percent adults and an equal number of school age and preschool children. The caseload size ranges from 70 to 80. Fifteen percent of our clients need augmentative communication, that is, they require a written, picture, sign or communication device to be understood. The area of augmentative communication continues to develop and improve which presents challenges for staff as they learn and acquire new programs. Speech-language pathology therapy was provided in home, early elementary schools and programs. Visits also occurred to Kensington Head Start, hospital, and daycare.

Nutrition Services: Nutrition Services through Child and Family is provided by two permanent part-time community dietitians. During 2001-2002:

- 106 referrals were received.
- 85 prenatal referrals received (63 opened for a nutrition counselling service).
- 11 prenatal class nutrition sessions given over the past year.

Most of the prenatal clients who were seen for Nutrition Service have other services involved, notably Child Protection and Financial Assistance.

Nutrition Services partnered with the East Prince Dietitians to provide nutrition information to staff and public during Nutrition Month in March.

CHILD, YOUTH & FAMILY SERVICES

PUBLIC HEALTH NURSING

LiPPY Coordinator Position: The Literacy For Pregnant and Parenting Youth, (LiPPY) project, funded by The National Literacy Secretariat, successfully concluded a two-year pilot project. Partners included The Home and School Federation, Western School Board, East Prince Laubach Literacy Council, Departments of Education and Health and Social Services, Francophone Community, and East Prince Health.

Based on findings and recommendations from the LiPPY Project, the Department of Education implemented a full-time education position based at Three Oaks Senior High School. This position is responsible for looking after the expectant and parenting student population of East Prince who are attending Kinkora , Kensington and Three Oaks High Schools. East Prince Health and various service providers partnered with the program.

Partnerships for a Healthier Community: Breastfeeding has been known to protect against Type I Diabetes (Childhood Diabetes) and Childhood Cancers as well as allergies, respiratory illness and hospital admissions due to diarrhea and vomiting. Public Health Nursing, has partnered with "Kids R First" to provide a "Breastfeeding For Moms and Babies" group. The group takes place every Wednesday evening at Kids R First and is in partnership with the Lactation Consultant from Public Health Nursing. Mothers seeking support and assistance to continue breastfeeding are informed of the group during the prenatal classes as well as at the new baby home visit.

Public Health Nursing responded to requests from within East Prince Health and the community to provide wellness / health checks. These were arranged and provided on site for the City of Summerside in February of 2002, Holland College in April 2002, as well as at Summerset Manor, Wedgewood Manor and Prince County Hospital sites throughout the spring. Health checks involved cholesterol testing, blood pressures and BMI's (Body Mass Index).

Child Health Clinics: Public Health Nursing (PHN) administered a satisfaction survey to parents attending child health clinics for their child's first immunization at two months of age. The total number of parents who were offered a questionnaire was 243 with an 84.4 percent response rate.

Key findings:

99% The public health nurses visited soon enough to meet parents needs
100% The parents questions were answered to their satisfaction
100% The parents were able to obtain more public health services, if needed
99% The parents were comfortable contacting the public health nurse with their concerns

Suggestions for improvement included elimination of the fee for immunizations and further follow-up when the baby is a month old, before coming for the first immunization at two months of age.

The target population for attendance at prenatal classes is first-time mothers. The number of first-time mothers attending classes, rose from 50 percent last year to 73 percent this year.

EVANGELINE COMMUNITY HEALTH CENTRE

The Evangeline Community Health Centre (ECHC) emphasizes wellness and health education by identifying and addressing the health needs of individuals, families and groups, thus contributing to the prevention of illness.

Community partnerships are very important to the success of the centre. By working closely with the community, the centre can begin to address the root causes that are negatively affecting the determinants of health. Service providers work closely with the school system so that students can receive early interventions in order to foster the best possible outcome. By working as a multi-disciplinary team, service providers can look at the child's global development in the preschool years and can begin addressing issues early. This year, the centre was involved with other partners in the development of a self -esteem kit and the production of skits showing areas where the child's self-esteem can be hurt or enhanced. The Association des Femmes Acadiennes et Francophones de l'Île sponsored this project. The ECHC, the Francophone Family Ressource Center, PEI Francophones Parents Association and the French school board are also partners in this project.

In the area of crime prevention, the ECHC is an active member of the Group Consultatif Communautaire Evangeline. The sessions look at simple ways to bring out the best in children and adults. Sessions are given to seniors, parents, teachers, adolescents, etc.

The centre is also partnering with the Francophone Women's Association on the prevention of Type 2 Diabetes. This three-year project is funded by Health Canada. The centre has participated in the organization of educational kitchens and have begun the production of 5 videos with local residents who have Type 2 Diabetes. These videos will be used to educate the public about the risk of Type 2 diabetes and shows that this chronic disease can be prevented or delayed by adapting good lifestyle practices.

The ECHC, along with several community partners, offered two wellness clinics. A total of 70 people attended and were given information and tools to encourage them to take charge of their health. An osteoporosis session was also held and 35 people attended. The ECHC resources remain an important service with an average of 20 users per month.

INCOME SUPPORT, MENTAL HEALTH, & ADDICTIONS

Purpose

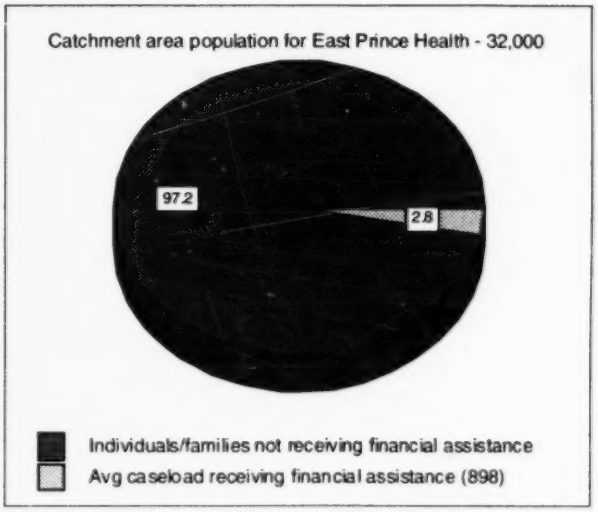
In partnership with the community, develop, deliver, and evaluate programs focused on enhancing the health of populations in East Prince so that individuals, families and communities are supported in attaining and maintaining optimal health.

Services

- Income Support & Disability Support Program
- Job Creation / Employment Enhancement
- Addictions
- Mental Health

INCOME SUPPORT SERVICES

Income Support: The Income Support Program continues to provide financial assistance to individuals and families who cannot provide for their own basic needs. An averaged total of 898 individuals/families received financial assistance in the East Prince area during the period April 2001 to March 31, 2002. During this period, the regional and provincial averages were lower than at any time in the past 20 years.


Catchment area population for East Prince Health - 32,000
97.2
2.8
Individuals/families not receiving financial assistance
Avg caseload receiving financial assistance (898)

The regional Day Care Subsidy Program is presently subsidizing 200 children within the East Prince area.

Income Support Services has moved to the Access PEI building off Water Street on the Summerside waterfront.

Disability Support Program: The Disability Support Program, which began in October, 2001, offers opportunities that can assist persons with disabilities to achieve their desired level(s) of independence. Since its beginning, the program provides assessment and support services to 232 residents of East Prince.

INCOME SUPPORT, MENTAL HEALTH, & ADDICTIONS

Budget: $12,080,300
Staff: 72

Income Support
Average caseload: 898

Addictions
Average Caseload: 638

Purpose

In partnership with the community, develop, deliver, and evaluate programs focused on enhancing the health of populations in East Prince so that individuals, families and communities are supported in attaining and maintaining optimal health.

Services

- Income Support & Disability Support Program
- Job Creation / Employment Enhancement
- Addictions
- Mental Health

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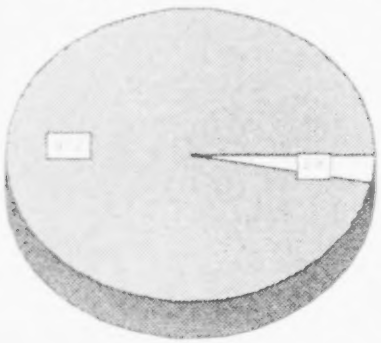

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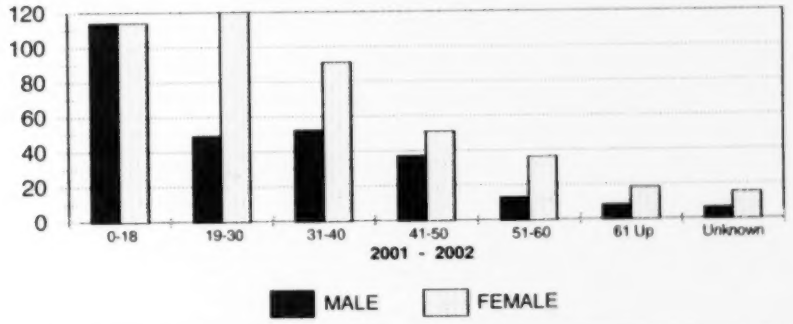
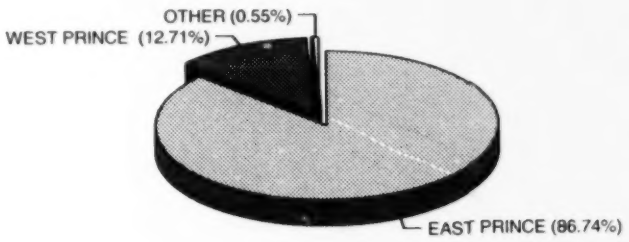
COMMUNITY MENTAL HEALTH

Community Mental Health provides community-based assessment, treatment, consultation, and follow up services to those individuals who are currently experiencing a range of mental health problems. The main function is to offer an early intervention/secondary prevention service targeted to individuals already experiencing mental distress.

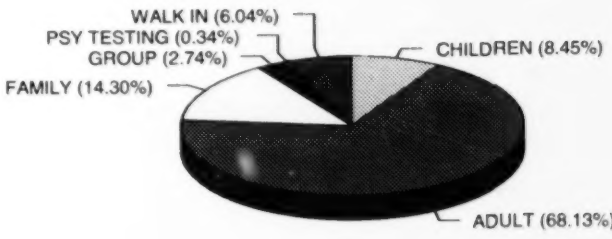
REFERRALS
POPULATION GROUPS



RESIDENCE OF REFERRALS
2001 - 2002



Breakdown of Clinical Activity
2001 - 2002



ADDICTION SERVICES

Demand for this program has risen steadily since 2000. With the reorganized service format, a change in client profiles has occurred. For instance, of the 277 ambulatory clients registered in 2001-2002, 96 (35 percent) were new clients. Of these, about 30 percent were female.

Tobacco Dependency Program: The Tobacco Dependency Program consists of an assessment and five educational sessions, either provided in an individual or group format. Participants registered in the program are also eligible for coverage of up to $75 (per year) toward the cost of a nicotine replacement therapy (patch or gum) or Zyban to aid in the cessation process.

Addiction Service Admissions by Fiscal Year		
		2001-2002
Inpatient Detox	219	0
Ambulatory Detox	193	277
Tobacco Dependency	34	174
Provincial Addictions Facility Admissions	39	187
TOTAL		

In East Prince, there were 174 participants in this fiscal year of whom 99 were females (57 percent) and 75 (43 percent) were male. Forty-six percent of participants completed the program. According to the Tobacco Dependency Program Evaluation (March 2002) the usual success rate for a comprehensive program is 20-30 percent, while success rates for willpower is 3 percent, advice from a physician is 10 percent, and the sole use of a nicotine replacement therapy is 14 percent.

Provincially, of the 209 participants who were contacted three months after exiting the program, 31 percent were not smoking at all and an additional 16 percent had smoked only a few cigarettes since completing the program.

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Addiction Services:

- Screening/ Assessment
- Ambulatory Detox
- Tobacco Dependency
- Rehabilitation
- Counselling
- Family Program
- Youth Programs
- Extended Care
- Aftercare
- Anger Management for Adults and Children (6-12)
- Adult Children of Alcoholics
- Children Affected by Chemical Dependency
- Relapse Prevention
- Gambling
- Women's Recovery
- Acupuncture

Addiction Services Admissions by Fiscal Year		
Services	**2000-2001**	**2001-2002**
Inpatient Detox	219	0
Ambulatory Detox	193	277
Tobacco Dependency	34	174
Provincial Addictions Facility Admissions	39	187
TOTALS	**485**	**638**

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(Addiction Services, Continued)

Ambulatory Detox Program: The Ambulatory Detox Program was created to provide an earlier intervention program for individuals struggling with alcohol and/or other drug abuse.

The Student Assistance Programs (SAP) are currently co-facilitated with staff members of the Western School Board. Under the SAP, three types of groups are offered as listed below:

- *Challenge Group:* designed for students who are harmfully involved with substance abuse
- *Friendship Group:* aimed to assist students who are affected by others' substance abuse (friends or family members).
- *Education Group:* provides students with information regarding the affects of alcohol and other drug use.

From September 2001 to May 2002 there were ten Student Assistance Programs involving 162 youth and the programs were completed in six different schools.

School	Date	Type of SAP	# of sessions	# in group
Athena	Oct - Dec 01	Friendship	10	9
Miscouche	Nov - Dec 01	Education	3	43
SIS	Jan - Mar 02	Friendship	10	33
Three Oaks	Mar 02	Challenge	10	9
Three Oaks	April 02	Challenge	10	8
Parkside	Apr - May 02	Friendship	8	12
Elm St	Apr - May 02	Friendship	8	11
Three Oaks	May 02	Challenge	10	6

ACUTE CARE

Budget:
$6,752,100

Permanent Staff:
145

Purpose

To provide high quality ambulatory and secondary in-patient acute services to the people of Prince Edward Island.

Services

- Emergency
- Surgery / CSR
- Oncology
- Endoscopy
- Medical
- Medical Day Surgery
- Intensive Care Unit
- Pharmacy

Ambulatory Care provides primary and secondary health care services through a number of multidisciplinary health care providers and services which aim to help prevent serious illness and long term hospitalization.

Ambulatory Health care services are provided to the patient in a clinic setting. One key focus of this service is patient teaching/education which focuses on prevention of illness and promotion of health and well being, resources, and support groups/services which are available to assist the patient and their family.

The goal of the Ambulatory Care clinics is to offer a range of health services that meet the needs of and improve the health status of our community. Within Prince County Hospital, the IV infusion clinic and the Oncology clinic operates approximately three days a week and in the past year has had approximately 1,800 booked procedures. This includes IV therapy and IV medication infusions, IV chemotherapy, IV midline, peripheral central catheter insertions, and dressing changes. The Endoscopy Unit operates five days a week and in the past year had approximately 2,200 booked procedures including gastroscopic and colonoscopic screenings. The OPD clinic has approximately 4,800 booked procedures which may include minor surgical, orthopedic, plastics, cardioversions, gynecology, and pain management procedures.

(Addiction Services: Continued)

Ambulatory Detox Program: The Ambulatory Detox Program was created to provide an earlier intervention program for individuals struggling with alcohol and or other drug abuse.

The Student Assistance Programs (SAP) are currently co-facilitated with staff members of the Western School Board. Under the SAP, three types of groups are offered as listed below:

- *Challenge Group*: designed for students who are minimally involved with substance abuse.
- *Knowledge Group*: aimed at those students who are affected by others substance abuse (friends or family members).
- *Education Group*: provides students with information explaining the effects of alcohol and other drug use.

From September 2001 to May 2002 there were six Student Assistance Programs involving 162 youth and the programs were completed in six different schools.

School	Date	Type of SAP	# of sessions	# in group
Athena	Oct - Dec 01	Knowledge	10	8
Miscouche	Nov - Dec 01	Education	10	12
SIS	Jan - Mar 02	Knowledge	10	10
Three Oaks	Mar 02	Challenge	10	8
Three Oaks	Apr 02	Challenge	10	8
Parkside	Apr - May 02	Knowledge	8	12
Elm St	Apr - May 02	Knowledge	8	11
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Budget:
$11,867,300

Permanent Staff:
183

Inpatient Caseload Activities:

Physiotherapy—2,682

Electrocardiogram—3,548

Respiratory— 634

Occupational Therapy— 560 +

Outpatient Caseload Activities:

Physiotherapy—4,755

Electrocardiogram—3,515

Respiratory— 3154

Occupational Therapy— 230 +

Laboratory— 20,693

Planning for Diabetes programming got underway over the past year for a county based service delivery model to be implemented in 2002.

Purpose

To provide therapeutic services to clients and patients and diagnostic services to service providers, supporting quality care.

Services

- Laboratory
- Radiology
- Allied Health - includes the following:
  - Respiratory Therapy
  - Physiotherapy
  - Occupational Therapy
  - ECG
  - Pastoral Care

Among the highlights in this area:

- Asthma programming continues to be developed for the county in collaboration with West Prince Health.
- Occupational Therapy Services in the Region benefited from a new bilingual Occupational Therapist.
- Planning for Diabetes programming got underway over the past year for a county based service delivery model to be implemented in 2002.

RADIOLOGY

During the year 2001 to 2002, the Radiology Department at Prince County Hospital offered services in three different areas: General Radiography, Mammography and Ultrasound. There was a total of 23,897 examinations completed during the past year at Prince County Hospital. In addition, there were 7,670 examinations from O'Leary community, Western and Stewart Memorial Hospitals which were interpreted at Prince County Hospital.

During 2001, we were able to increase our mammography service to provide for all women who meet the PEI Breast Screening criteria. In addition to mammography, wire guided needle biopsies and ultrasound guided biopsies were offered. Mammography screening is an important component of disease prevention. Early detection can lead to improved outcomes.

DIAGNOSTIC, THERAPEUTIC, & SUPPORT SERVICES

Purpose

To provide therapeutic services to clients and patients and diagnostic services to service providers, supporting quality care.

Services

- Laboratory
- Radiology
- Allied Health - includes the following:
  - Respiratory Therapy
  - Physiotherapy
  - Occupational Therapy
  - ECG
  - Pastoral Care

Among the highlights in this area:

- Asthma programming continues to be developed for the county in collaboration with West Prince Health.
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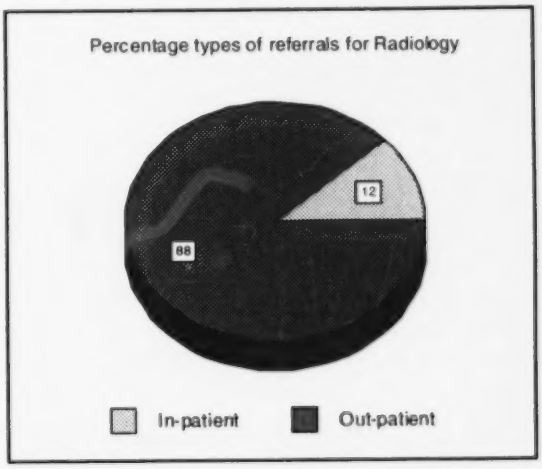

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(Radiology, Continued)

On February 4, 2002, the Provincial Radiology Information System was implemented. This information is used for scheduling, registration, report generation and tracking of patients. It has provided increased efficiencies, allowing faster access by physicians to reports generated anywhere on PEI. Physician viewing stations have been set up at PCH to allow physicians access to reports online.

Much work was also carried out in preparation for the new Picture Archiving Computer System (PACS) which will be integrated into the new Prince County Hospital. The advance work will help ease the transition for staff into the new facility.

Radiology services were offered primarily to residents of Prince County, but staff were occasionally able to accommodate patients from across the province when there were Radiologist shortages in other regions.

Over the past year, efforts were underway to redesign how client services are registered. The Radiology Department implemented the Provincial Registration Information System in January of last year and prepared for a fall 2002 implementation of a new Picture Archiving Computerized System. The systems implemented will advance efficiencies of service and technology in the new Prince County Hospital scheduled to open in the fall of 2003.

LABORATORY

The Prince County Hospital Laboratory continues to provide quality Laboratory services to Physicians and their clients. The workload is increasing as more testing is performed locally. Staff have been dedicating a lot of time to preparations for the move to the new Prince County Hospital.

The statistics for fiscal year 2001-2002 are:

In-Hospital patient tests	74,224
Outpatient tests	134,500
Referred in (doctor offices) tests	99,875
Laboratory client visits	20,693

FACILITY PLANNING

Construction: On June 12, 2001, government announced East Prince Partnership Limited (a consortium of Schurman's Construction and Fitzgerald & Snow) would build the hospital and construction began very shortly thereafter.

At the peak during the year, 125 workers were on the site, approximately 100 of which were local trades people. By the end of March, 2002, the building was 45 percent complete. Interior mechanical and electrical work was underway and partitions were beginning to be installed.

Equipment Procurement: With the design complete and construction underway, the Facility Planning Team turned its attention to purchasing the equipment and furnishings for the new building. $12.5 million had been raised the year before by the Prince County Hospital Foundation.

In October, 2001, ten Requests for Proposals (RFP's) were issued. Proposals were received from vendors to provide all the diagnostic imaging (x-ray) equipment, the sterilizing equipment, the rethermalization equipment for food service, cardiac monitors, clinical lighting, morgue equipment and sterilizing equipment. Extensive evaluations on both the technical elements and the financial aspects of the proposals were conducted.

PLANNING FOR A NEW PRINCE COUNTY HOSPITAL

(Facility Planning, Continued)

Program Planning: The Facility Planning Team conducted a transition workshop on change management in order to help staff prepare for the move to the new hospital.

Implementation of new technology has already begun at the present Prince County Hospital site with the installation of multi-functional printers for print-on-demand capability. A new Radiology Information System (RIS) has been installed to improve both internal and provincial radiology communications. This is an important step in the implementation of a provincial PACS (Picture Archiving and Communications System) which will take place in the upcoming year.

Considerable work has been done both internally and externally with Island Tel (Aliant) exploring the telecommunication needs and solutions with new systems and technology.

The team continues to work with colleagues to further develop the new services which will be offered in the new facility. The Restorative Care Committee has been working on the development of the program philosophy and admission criteria for this new patient care area.

Efforts are focused on operationalizing programs and the phasing in of new positions. The team is keeping in touch with the unions on staffing for the new building and the impact of changing roles.

The team continues to work on the finer details of design: i.e. bilingual signage, color schemes, keying, security, flooring and room finishes.

The team also participated in a consultative process, lead by the Regional Board, on naming the new hospital. The community and staff reacted positively to the announcement that the hospital name would remain the same.

Planning for occupancy has begun with moving consultants, Health Care Relocations, being contracted to lead the move. They have made initial visits to Summerside and are working with department managers. Two committees have been struck—a general move committee and a patient move committee.

INFORMATION MANAGEMENT

Purpose

Financial and Corporate Services administers financial and information systems and provides property maintenance, materials management, laundry and environmental services to East Prince Health in order to support the sustainable delivery of quality client services.

Services

- Finance
- Information Systems
- Materials Management
- Regional Maintenance
- Environmental Services

The following pages are the audited Financial Statements for East Prince Health during the fiscal year April 1, 2001—March 31, 2002.

Grant Thornton LLP
Chartered Accountants
Management Consultants
Canadian Member of
Grant Thornton International

Grant Thornton

East Prince Health
Financial Statements

March 31, 2002

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Statement of Revenue and Expenses	2
Balance Sheet	3
Statement of Fund Balances	4
Statement of Cash Flows	5
Statement of Tangible Capital Assets	6
Notes to the Financial Statements	7 - 11

Grant Thornton LLP
Chartered Accountants
Management Consultants
Canadian Member of
Grant Thornton International

Grant Thornton

Auditors' Report

To the Members of the Board of
East Prince Health:

We have audited the balance sheet of East Prince Health as at March 31, 2002, and the statements of revenue and expenses, fund balances, cash flows and tangible capital assets for the year then ended. These financial statements are the responsibility of the Region's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects, the financial position of the Region as at March 31, 2002, and the results of its operations and cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.

Summerside, Prince Edward Island

June 7, 2002

Grant Thornton LLP
Chartered Accountants

P. O. Box 1660
220 Water Street
Summerside
Prince Edward Island
C1N 2V5
Tel: (902) 436-9155
Fax; (902) 436-6913

East Prince Health
Statement of Revenue and Expenses

Year Ended March 31	2002	2001
Revenue		
Department of Health and Social Services (Note 7)	$ 53,538,991	$ 49,610,857
Patient/client fees	1,453,164	1,309,680
Special projects and other (Note 8)	325,446	587,633
Donations - Prince County Hospital Foundation (Note 9)	158,029	230,403
	55,475,630	51,738,573
Expenses		
Hospital services	26,603,390	24,754,891
Child & Family services	12,039,403	10,958,334
Long term care	10,025,550	9,340,696
Home Care	1,495,826	1,473,287
Addiction services	1,378,630	1,454,316
Housing services	1,274,824	1,249,231
Community Development (Note 10)	845,914	756,226
Public Health	697,433	625,599
Mental Health	488,536	448,478
Health Facility Planning	335,323	383,888
Job Creation Program	282,603	284,625
Interest on long term debt	8,198	9,002
	55,475,630	51,738,573
(Deficiency) excess of revenue over expenses	$ -	$ -

See accompanying notes to the financial statements.

East Prince Health
Balance Sheet

March 31

	2002	2001
Assets		
Current		
Cash - unrestricted	$ 438,460	$ 679,391
Cash - restricted (Note 3)	33,460	30,307
Receivables (Note 4)	6,604,192	6,079,926
Prepaid expenses	195,249	692,040
	7,271,361	7,481,664
Investments in bonds and certificates at cost, estimated market value $326,478 (2001 - $210,382)	326,537	200,000
	$ 7,597,898	$ 7,681,664
Liabilities		
Current		
Payables and accruals (Note 5)	$ 7,427,596	$ 7,498,756
Funds held in trust	33,460	30,307
Current portion of long term debt	16,606	15,759
	7,477,662	7,544,822
Long term debt (Note 6)	120,154	136,760
	7,597,816	7,681,582
Fund balances		
Appropriated Fund (Page 4)	82	82
	$ 7,597,898	$ 7,681,664

On behalf of the Board

_____ Board Member _____ Board Member

See accompanying notes to the financial statements.

East Prince Health
Statement of Fund Balances

March 31	2002	2001
Appropriated Fund		
Fund balance, beginning of year	$ 82	$ 540,082
Transferred back to Prince County Hospital Foundation	-	(540,000)
Fund balance, end of year	$ 82	$ 82

See accompanying notes to the financial statements.

East Prince Health
Statement of Cash Flows

Year Ended March 31

	2002	2001
Increase (decrease) in cash and cash equivalents		
Operations		
Changes in		
Cash - restricted	$ (3,153)	$ (442)
Accounts receivable	(524,266)	(1,544,579)
Prepaid expenses	496,791	(521,402)
Payables and accruals	(71,160)	1,571,625
Funds held in trust	3,153	442
	(98,635)	(494,356)
Financing		
Repayment of long term debt	(15,759)	(14,955)
Decrease in appropriated funds	-	(540,000)
	(15,759)	(554,955)
Investing		
Proceeds from expiration of bond	200,000	-
Advance from Prince County Hospital Foundation	-	594,165
Purchase of investments	(326,537)	-
	(126,537)	594,165
Net decrease in cash and cash equivalents	(240,931)	(455,146)
Cash and cash equivalents, beginning of year	679,391	1,134,537
Cash and cash equivalents, end of year	$ 438,460	$ 679,391

See accompanying notes to the financial statements.

East Prince Health
Statement of Tangible Capital Assets

Year Ended March 31

	Land	Pavement	Buildings	Equipment	**2002 Total**	2001 Total
Cost of Tangible Capital Assets						
Opening cost	$ 134,310	$ 57,666	$ 6,974,322	$11,033,224	**$ 18,199,522**	$ 17,683,432
Additions	-	-	-	380,246	**380,246**	516,090
Closing cost	134,310	57,666	6,974,322	11,413,470	**18,579,768**	18,199,522
Accumulated Depreciation						
Opening balance	-	57,666	4,826,718	6,006,052	**10,890,436**	10,473,845
Add: depreciation	-	-	80,908	335,145	**416,053**	416,591
Closing balance	-	57,666	4,907,626	6,341,197	**11,306,489**	10,890,436
Net Carrying Amount of Tangible Capital Assets	$ 134,310	$ NIL	$ 2,066,696	$ 5,072,273	**$ 7,273,279**	$ 7,309,086

See accompanying notes to the financial statements.

East Prince Health
Notes to the Financial Statements
March 31, 2002

1. Nature of operations

East Prince Health, a non-profit organization, operates under the authority of the Health and Community Services Act, Part III (the "Act"). East Prince Health commenced operations on April 5, 1994 when the Health and Community Services Agency (the "Agency") approved the establishment of the regional health authorities as provided under the Act. The Agency Board also approved the core services that must be available and reasonably accessible to all residents of East Prince.

The core services managed by East Prince Health on behalf of residents of East Prince and the Province of P.E.I. are:

Program/Service

Child and Family Services	Prince County Hospital
Home Care	Public Health Nursing
Housing	Stewart Memorial Hospital
Community Mental Health	Summerset Manor
Prince County Addiction Services	Wedgewood Manor
Job Creation Program	Community Development

2. Summary of significant accounting policies

Revenue recognition

East Prince Health follows the deferral method of accounting for grants for special projects. Grants restricted for special projects are recognized as revenue in the year in which the related expenses are incurred. Unrestricted amounts are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

Cash and cash equivalents

Cash and cash equivalents include cash on hand and balances with banks, net of bank overdrafts.

Financial Support Overpayments

Financial support overpayments are recorded as receivable when identified with a full provision as a doubtful account. Recoveries of financial support overpayments are credited to financial support expenditures when received.

Income from Investments

Income from investments is recorded on a cash basis.

2. Summary of significant accounting policies (cont'd)

Tangible Capital Assets

Tangible capital assets are expensed as a component of program costs in the year of acquisition. During the year, capital asset purchases of $380,246 (2001 - $516,090) were expensed. The Region received designated funding for capital purchases in the amount of $378,766 (2001 - $405,831) during the year.

Inventory

Inventory in the amount of $614,218 (2001 - $433,581) has not been reflected on the balance sheet.

Appropriated Fund

East Prince Health received $750,000 from the Prince County Hospital Foundation to fund information technology initiatives. The appropriated fund balance had represented the unexpended portion of these funds. The fund is reduced each year by the amount of capital expenditures relating to information technology. In 2001, $540,000 was transferred back to the Prince County Hospital Foundation.

Vacation Pay and Retirement Allowances

Vacation pay is recorded as a liability when earned. Retirement allowances are recorded as a liability when an employee meets the eligibility criteria. Retiring allowances are funded separately from the regular funding received from the Department of Health and Social Services except for Prince County Hospital which is funded on an ongoing basis.

Pension Plans

Employees of East Prince Health belong to different pension plans according to their historical workplace. Former hospital employees and all new employees since regionalization are part of the uniform pension plan for employees of all Prince Edward Island hospitals. All other employees are part of the uniform pension plan of the civil service of Prince Edward Island. The hospital pension plan is a defined benefit pension plan for basic pension contributions and a defined contribution pension plan for supplementary pension contributions. According to the most recent actuarial report dated January 1, 2000 employer contributions to the pension plan are sufficient to meet the requirements of the plan and a pension fund surplus existed at that date. The civil service pension plan is the defined benefit pension plan of the Province of Prince Edward Island. For employees belonging to this plan, the employer's share of the benefits plus any additional future actuarial liabilities are assumed by the Province of Prince Edward Island. These pension plans are not reflected in these financial statements.

2. Summary of significant accounting policies (cont'd)

General

These financial statements do not include the assets, liabilities and activities of the Prince County Hospital Foundation, Stewart Memorial Hospital Foundation, or the hospitals' auxiliaries.

Other

East Prince Health acts as an agent for the Province of P.E.I. for the collection of revenues. During the year revenue of $3,068,289 (2001 - $2,762,524) was collected from the following areas:

- Long term Care
- Housing Services
- Home Care
- Addiction Services
- Public Health Nursing

Revenues collected are not reflected in the body of the financial statements.

3. Cash-restricted	2002	2001
Resident Trust Funds	$ 27,145	$ 24,912
Memorial Trust Funds	6,315	5,395
	$ 33,460	$ 30,307

4. Receivables	2002	2001
Financial Support overpayments	$ 1,228,160	$ 1,265,076
Patients and other	931,949	1,116,145
Department of Health and Social Services	5,683,456	4,960,487
	7,843,565	7,341,708
Less: allowance for doubtful accounts	(1,239,373)	(1,261,782)
	$ 6,604,192	$ 6,079,926

5. Payables and accruals	2002	2001
Trade	$ 2,154,182	$ 3,171,189
Deferred revenue	839,654	628,192
Accrued salaries and benefits	4,433,760	3,699,375
	$ 7,427,596	$ 7,498,756

6. Long term debt	2002	2001
5 3/8% Municipal Development Loan Board debenture, amortized to and maturing in 2008, payable in annual installments of $23,957 including interest.	$ 136,760	$ 152,519
Less: current portion of long term debt	16,606	15,759
	$ 120,154	$ 136,760

Annual principal repayments over the next five years are as follows: 2003 - $16,606; 2004 - $17,499; 2005 - $18,439; 2006 - $19,430; 2007 - $20,475.

Funds are provided annually by the Department of Health and Social Services for the above repayments.

7. Department of Health and Social Services Funding	2002	2001
Operations	$ 53,201,698	$ 48,854,357
Health Stabilization Fund	-	556,500
Health Facility Planning	337,293	200,000
	$ 53,538,991	$ 49,610,857

8. Special projects and other

During the year, East Prince Health participated in various projects and initiatives, such as the community labor – management partnership project and the East Prince youth development center whereby funding was provided by project sponsors. The related project expenditures are included in Community Development expenses.

9. Donations – Prince County Hospital Foundation

During the year, East Prince Heath received donations towards the purchase of medical and non-medical equipment in the amount of $378,766 (2001 - $318,331). However, certain equipment acquisitions approved during the year did not occur until subsequent to year end. Accordingly, $220,737 (2001 - $87,928) of donations are included in deferred revenue.

10. Community development

	2002	2001
Grants to non-governmental organizations	$ 799,761	$ 737,305
Special projects and other	46,153	18,921
	$ 845,914	$ 756,226

11. Subsequent Event

On April 9, 2002 the Minister of Health and Social Services announced a significant restructuring of the Health System. One of the key components of the plan was to establish a Provincial Health Services Authority (PHSA), which would be responsible for secondary acute and specialized provincial services. The services provided by Queen Elizabeth Hospital, Prince County Hospital, Hillsborough Hospital, and the Provincial Addictions centre are expected to be consolidated under the new Authority during 2002-2003.